

HEALTH CARE UTILIZATION OF PATIENTS WITH NON-AFFECTIVE PSYCHOTIC DISORDERS

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Introduction: Research indicates a higher risk of somatic problems and cardiovascular and respiratory mortality among patients with non-affective psychotic disorders (NAPD). Data on health care (HC) utilization of this group have revealed ambivalent results pointing at a higher appeal to somatic HC and possible under-consumption.

Objective: This study focuses on somatic HC utilization in the Netherlands among patients with NAPD, unipolar depression, anxiety or bipolar disorder, compared to matched controls without psychiatric diagnosis.

Aims: To study possible under-consumption associated with NAPD and its correlates.

Methods: The HC utilization of 2,392 cases with NAPD registered in the Psychiatric Case Register Middle Netherlands (PCR-MN) and above mentioned comparison groups was analyzed by using linked data on prescribed medication, general practitioner (GP) consults and treatment by specialists from insurance company Agis.

Results: The costs for somatic HC among NAPD patients was on average €1621 per year, marginally higher compared to matched controls (€1441, $p=0.079$). Among patients with depression and anxiety, much greater differences with their matched controls were found ($p<0.05$). The percentage of NAPD patients who received somatic treatment by a specialist was lower than that of controls ($OR=0.89$, $P<0.05$), especially at higher age (>60) and longer duration since diagnosis (>5 years) ($OR=0.60$, $P<0.05$). In particular, treatment by a specialist was lower for cardiovascular disorders ($OR=0.61$) and diabetes ($OR=0.37$, $P<0.05$).

Conclusion: In view of the higher somatic death risk, our data suggest HC under-consumption, which is increasing with a longer illness duration and older age.